

Site Accreditation Report – University of South Dakota, Student Counseling Center

Completed: March 20th, 2019

Levels of Care Reviewed:

Substance Use Disorder (SUD) Services

Prevention

Outpatient Services

Review Process: USD Student Counseling Center was reviewed by the Division of Behavioral Health staff for adherence to the Administrative Rules of South Dakota (ARSD) and Contract Attachments. The following information was derived from the on-site accreditation survey of your agency. This report includes strengths, recommendations, and citations for Plans of Corrections and results from reviewing policies and procedures, personnel files, client charts, and conducting staff interviews.

Administrative Review Score: 100.0%

Combined Client Chart Review Score: 92.7%

Cumulative Score: 95.4%

ADMINISTRATIVE REVIEW SUMMARY

Strengths:

The agency provides unique services to students on their college campus which includes both mental health and substance use services. Multiple prevention Evidence Based Practices' are utilized ensuring the students receive the best fit. USD has strong relationships with other entities on their campus to provide a collaborative approach. A prevention program survey is completed with all freshman to drive the prevention program. The policy and procedure manual is organized and easy to follow.

Recommendations:

1. According to ARSD 67:61:06:04, each agency shall have a written grievance policy and procedure for hearing, considering and responding to client grievances. The agency has a grievance policy and procedure included in the manual however, it is required that the procedure shall include the ability to appeal the agency's decision regarding ineligibility or termination of services to the division as provided in ARSD 67:61:06:05 and shall include the telephone number and address of the division. It is recommended that the address and phone number of the Division of Behavioral Health is added to the grievance forms.

Plan of Correction: None

CLIENT CHART REVIEW SUMMARY

Strengths: The charts were well organized. All client charts reviewed contained TB screens and financial eligibility forms. Several screening tools were utilized during the initial assessment to help substantiate the diagnosis.

Recommendations:

1. In review of the client's integrated assessments at least one or more assessments were missing the following requirements in ARSD 67:61:07:05:
 - Living environment or housing (included in the screening tool)
 - Past or current indications of trauma, domestic violence, or both if applicable; (included in the screening tool)
 - Behavioral observations or mental status, for example, a description of whether affect and mood are congruent or whether any hallucinations or delusions are present

Some of the above required information was found within a screening tool that is utilized with clients. It is recommended this information is added to the integrated assessment for full compliance.

2. According to ARSD 67:61:07:06 treatment plans shall be completed within 30 days of intake. There was one treatment plan reviewed. The treatment plan was not completed within the required time frame. Ensure that all treatment plans are completed within 30 days of admission.
3. According to ARSD 67:61:07:08 progress notes shall include a brief description of what the client and provider plan to work on during the next session, including work that may occur between the sessions, if applicable. One chart was reviewed that contained progress notes, that progress note included the same narrative for plans for next session. Ensure that the progress notes contain a personalized plan for each session.
4. According to ARSD 67:61:07:05 integrated assessments shall include eligibility determination including level of care determination for substance use services. The one assessment that was reviewed for eligibility determination contained ASAM criteria for the client however, all six dimensions were not included. Best practice should include assessments with all six dimensions identified.
5. According to ARSD 67:61:07:10 when a client prematurely discontinues services, reasonable attempts shall be made and documented by the agency to re-engage the client into services if appropriate. One chart contained a discharge and it did not show documentation to of reasonable attempts to re-engage the client. The agency should contact the client to re-engage services and include documentation in the chart.

Plan of Correction: The following area will require a plan of correction to address the rule of non-compliance which shall include an updated policy and/or procedure, a time frame for implementation of this procedure, the staff position or title responsible for implementation and the staff position or title responsible for ensuring continued compliance of this rule.

1. According to ARSD 67:61:07:05 an integrated assessment shall include strengths of the client and the client's family if appropriate, as well as previous periods of success and the strengths that contributed to that success. Identification of potential resources within the family, if applicable. Six charts were reviewed, and one contained the client's strengths within the assessment. The agency should ensure strengths are addressed and documented when assessments are completed.